

SERFF Tracking Number:	TRVA-125390038	State:	Arkansas
Filing Company:	The Standard Fire Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	2007-12-0045B		
TOI:	09.0 Inland Marine	Sub-TOI:	09.0006 Other Personal Inland Marine
Product Name:	Wedding Protector Plan		
Project Name/Number:	Wedding Protector Plan/2007-12-0045B		

Filing at a Glance

Company: The Standard Fire Insurance Company

Product Name: Wedding Protector Plan

TOI: 09.0 Inland Marine

Sub-TOI: 09.0006 Other Personal Inland Marine

Filing Type: Form

SERFF Tr Num: TRVA-125390038

SERFF Status: Closed

Co Tr Num: 2007-12-0045B

Co Status:

Author: Ann Lavorgna

Date Submitted: 12/17/2007

State: Arkansas

State Tr Num: EFT \$50

State Status: Fees verified and received

Reviewer(s): Becky Harrington, Betty Montesi, Brittany Yielding

Disposition Date: 12/26/2007

Disposition Status: Approved

Effective Date Requested (New): 02/14/2008

Effective Date Requested (Renewal):

Effective Date (New): 02/14/2008

Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Wedding Protector Plan

Project Number: 2007-12-0045B

Reference Organization:

Reference Title:

Filing Status Changed: 12/26/2007

State Status Changed: 12/26/2007

Corresponding Filing Tracking Number:

Filing Description:

Wedding Protector Forms

Status of Filing in Domicile:

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

Company and Contact

Filing Contact Information

Ann Lavorgna, Regulatory Analyst
One Tower Square

AJLAVORG@travelers.com
(860) 277-5466 [Phone]

<i>SERFF Tracking Number:</i>	<i>TRVA-125390038</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>The Standard Fire Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
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Hartford, CT 06183 (860) 277-5204[FAX]

Filing Company Information

The Standard Fire Insurance Company	CoCode: 19070	State of Domicile: Connecticut
One Tower Square	Group Code: 3548	Company Type: Property/Casualty
Hartford, CT 06183	Group Name:	State ID Number:
(860) 277-7395 ext. [Phone]	FEIN Number: 06-6033509	

SERFF Tracking Number: TRVA-125390038 *State:* Arkansas
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Filing Fees

Fee Required? Yes
Fee Amount: \$0.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Standard Fire Insurance Company	\$50.00	12/17/2007	17138588

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Becky Harrington	12/26/2007	12/26/2007

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Disposition

Disposition Date: 12/26/2007

Effective Date (New): 02/14/2008

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	TRVA-125390038	State:	Arkansas
Filing Company:	The Standard Fire Insurance Company	State Tracking Number:	EFT \$50
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	ExMemo	Approved	Yes
Form	New Business Declarations	Approved	Yes
Form	Special Event Liability Endorsement Including Liquor Liability	Approved	Yes
Form	Special Provisions - Arkansas	Approved	Yes

SERFF Tracking Number: TRVA-125390038 State: Arkansas

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	New Business Declarations	PL-13105	(02-08)	Declaration Replaced s/Schedule	Replaced Form #:0.00 Previous Filing #:		Dec Page PL13105B08 (Mock Up with Liquor).pdf
Approved	Special Event Liability Endorsement Including Liquor Liability	SE-200L	(02-08)	Endorseme New nt/Amendm ent/Condi ons		44.00	SE200LB08.pdf
Approved	Special Provisions - Arkansas	SE-300 AR	(02-08)	Endorseme Replaced nt/Amendm ent/Condi ons	Replaced Form #:58.60 Previous Filing #:		SE300ARB08.pdf



New Business
Declarations

SPECIAL EVENT INSURANCE POLICY

Wedding Protector Plan

INSURED AND AGENT INFORMATION

(NAMED INSURED)
NAME & MAILING ADDRESS

AGENT INFORMATION

HONOREE(S)

ADDITIONAL INSURED(S)

INSURED EVENT

EVENT LOCATION(S)

POLICY INFORMATION

Policy No:

Your Insurer: Travelers

POLICY PERIOD

ISSUE DATE

EVENT DATE

For Policy Service call:

For Claim Service call: 1-800-CLAIM-33

TOTAL POLICY PREMIUM
This Is Not A Bill

\$XX,XXX.XX

POLICY COVERAGES & LIMITS OF LIABILITY

SPECIAL EVENT COVERAGES

A – Cancellation or Postponement of Event
B – Additional Expenses
C – Event Photographs and Event Video
D – Event Gifts
E – Special Attire
F – Special Jewelry
G – Lost Deposits

LIMIT

\$
\$
\$
\$
\$
\$
\$

OPTIONAL ENDORSEMENTS & COVERAGES

ENDORSEMENTS

	<u>LIMIT OF LIABILITY</u>	<u>PREMIUM</u>
SPECIAL EVENT LIABILITY: Effective 12:01 am standard time on the EVENT DATE: until 2:00am standard time on (insert next calendar date here, only)	\$ per occurrence/ general aggregate	
PROPERTY DAMAGE LIABILITY	\$	Included*
SPECIAL EVENT LIABILITY: Effective 12:01 am standard time on the EVENT DATE:	\$ per occurrence/ general aggregate	
PROPERTY DAMAGE LIABILITY	\$	Included*
LIQUOR LIABILITY COVERAGE Maximum Number of Guests:		\$\$\$

COVERAGES

EXTENDED TERRITORY	Not Applicable	Included*
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POLICY FORMS AND ENDORSEMENTS

SE1	(10-06) Special Event Insurance	Mandatory
	(10-06) Special Provisions	Mandatory
SE 200	(10-06) Special Event Liability	Optional
Or		
SE-200L	(02-08) Special Event Liability (Including Liquor Liability)	Optional
SE 201	(10-06) Additional Insured	Optional

OTHER ADJUSTMENTS

* NOTE: The additional cost for any optional endorsement or coverage shown as "included" is contained in the Total Policy Premium amount.

FOR YOUR INFORMATION

This is not a bill.

If you require additional copies of the Declarations for your records, to provide proof of insurance for your venue(s) or if you have any questions about your insurance, please call 1 800 DIAL WPP (1-800-342-5977).

Thank you for insuring with Travelers. We appreciate your business

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SPECIAL EVENT LIABILITY ENDORSEMENT INCLUDING LIQUOR LIABILITY

For an additional premium, **we** will provide the coverage described in this endorsement.

POLICY PERIOD

The coverage provided under this endorsement applies only to **occurrences** during the **policy period**.

DEFINITIONS

For purposes of this endorsement, the words below mean the following:

Bodily injury means bodily harm, sickness, disease or death of a person.

Business means a trade, profession, occupation, engaged in on a full-time, part-time or occasional basis.

Insured means the **named insured** and each **honoree**.

Insured contract means a contract or lease of facilities or premises, fixtures, improvements or contents, for use at, or as, the **event location**.

Occurrence means

1. an accident, including continuous or repeated exposure to substantially the same general conditions, occurring at the **event location** during the **policy period**, that results in **bodily injury** or **property damage**; or
2. an offense, including a series of related offenses, committed at the **event location** during the **policy period**, that results in **personal injury**.

Personal injury means injury other than **bodily injury** caused by any of the following offenses committed on the **event date** at the **event location**:

1. False arrest, detention, or imprisonment, or malicious prosecution;
2. Libel, slander or defamation of character; or
3. Invasion of privacy, wrongful eviction or wrongful entry.

Policy Period means date shown as the **event date** in Special Event Liability section of the **Declarations**.

Pollutants means one or more solid, liquid, gaseous, or thermal irritant or contaminant, including smoke, vapor, soot, fumes, acids, alkalis, chemicals and waste. Waste includes materials to be recycled, re-conditioned, or reclaimed.

Property damage means physical injury to, destruction of, or loss of use of tangible property.

Territory means the United States of America, its territories and possessions, Puerto Rico or Canada, and cruise ships leaving from a port within these territories.

All other definitions remain the same.

LIABILITY COVERAGES

1. Bodily Injury, Property Damage and Personal Injury

If a claim is made or a suit is brought against an **insured** for damages because of **bodily injury**, **property damage** or **personal injury** caused by an **occurrence** to which this coverage applies, **we** will:

- a. Pay up to **our** limit of liability for the damages for which an **insured** is legally liable. Damages include prejudgment interest awarded against an **insured**; and
- b. Provide a defense at **our** expense by counsel of **our** choice, even if the suit is groundless, false or fraudulent. **We** may investigate and settle any claim or suit that **we** decide is appropriate. **Our** duty to settle or defend ends when the amount **we** pay for damages resulting from the **occurrence** exhausts **our** limit of liability.

2. Additional Payments

When arising out of an **occurrence** to which this coverage applies, **we** will cover the following in addition to **our** limit of liability:

- a. Costs and expenses **we** incur to defend a claim or lawsuit against an **insured**;
- b. Interest which accrues after judgment in a lawsuit and before **we** pay, offer, or deposit in court that part of the judgment which does not exceed **our** limit of liability;
- c. Premiums on bonds required in a suit **we** defend, but only for that portion of the bond not exceeding **our** limit of liability. **We** have no duty to apply for or furnish these bonds; and
- d. Reasonable expenses incurred by an **insured** at **our** request. This includes actual loss of wages up to \$100 a day due to attendance at hearings or trials at **our** request.

LIMITS OF LIABILITY

1. The most **we** will pay for all damages for any one **occurrence** is the limit of liability shown on the **Declarations**. This is the most we will pay regardless of the number of **insureds**, claims made, suits brought, persons injured, property damaged, or exposures or premiums shown on the **Declarations**.
2. The general aggregate limit is the most **we** will pay for all damages to which this insurance applies regardless of the number of **occurrences**. Other than as set out below (regarding an **insured's** liability for damage to property rented to or hired by an **insured**), there is no separate limit for any person or entity insured under this endorsement.
3. Subject to the general aggregate limit and the per **occurrence** limit, the most **we** will pay for all **property damage** to the **event location**, or to any fixtures and contents rented, hired, loaned to, or within any **insured's** care, custody or control at the **event location**, is the limit of liability shown on the **Declarations** as **property damage** liability sub-limit. This is the most **we** will pay regardless of the number of **insureds**, claims made, suits brought, property damaged or exposures.

LIABILITY EXCLUSIONS

This endorsement does not apply to:

1. **Bodily injury** or **property damage** which is expected or intended by an **insured** even if the resulting **bodily injury** or **property damage**:
 - a. is of a different kind, quality or degree than expected or intended; or
 - b. is sustained by a different person, entity, real or personal property, than expected or intended.

However, this exclusion 1. does not apply to **bodily injury** resulting from the use of reasonable force by an **insured** to protect persons or property.
2. **Bodily injury, property damage or personal injury**:
 - a. arising out of a **named insured's** or an **honoree's business** pursuits or **business** property.
 - b. for which an **insured** may be held liable by reason of:
 - i. causing or contributing to the intoxication of any person;

- ii. furnishing alcoholic beverages to a person under the legal drinking age or under the influence of alcohol; or
- iii. violation of any law or regulation relating to the sale, gift, distribution or use of alcoholic beverages.

This exclusion 2.b. applies only if the insured is in the business of manufacturing, distributing, selling or furnishing alcoholic beverages.

- c. arising out of:
 - i. the ownership, maintenance, use, loading or unloading, or entrustment of any motor vehicle, motorized vehicle, trailer, watercraft, aircraft or recreational vehicle;
 - ii. vicarious liability, whether or not statutorily imposed, for the actions of a child or minor using any motor vehicle, motorized vehicle, trailer, watercraft, aircraft or recreational vehicle; or
 - iii. the failure to supervise, or the negligent supervision, of any person, by an **insured** in connection with any motor vehicle, motorized vehicle, trailer, watercraft, aircraft or recreational vehicle.
- d. arising out of the use, sale, manufacture, delivery, transfer or possession by any person of a Controlled Substance, as defined by the Federal Food and Drug Law at 21 U.S.C.A. Sections 811 and 812. Controlled Substances include but are not limited to cocaine, marijuana, LSD and all narcotic drugs. However, this exclusion shall not apply to the legitimate use of prescription drugs by a person following the orders of a licensed physician.
- e. arising out of the acts or omissions of any provider of goods or services in conjunction with the **event**, whether or not they are a paid contractor or **vendor**.
- f. arising out of the rendering or failing to render professional services.
- g. arising from a violation of a penal statute or ordinance, with the knowledge of an **insured**.
- h. arising out of the actual, alleged or threatened release, discharge, escape, dispersal, seepage or migration of **pollutants**:
 - i. at or from any premises, site or location which is or was at any time owned or occupied by, or rented or loaned to any **insured**, or
 - ii. which are or were at any time transported, handled, stored, treated, dis-

posed of, or processed as waste by or for any **insured**.

Subparagraph 1. does not apply to **property damage** arising out of heat, smoke or fumes from a hostile fire. As used in this exclusion a hostile fire is one which becomes uncontrollable or breaks out from where it was intended to be.

- i. arising out of the actual, alleged or threatened absorption, adsorption, ingestion or inhalation by any person of lead or asbestos at or from any premises, site or location which is or was at any time owned, occupied, rented or loaned by an **insured**.
- j. caused directly or indirectly by war, including the following and any sequence of the following:
 - i. undeclared war, civil war, insurrection, rebellion or revolution;
 - ii. warlike act by military force or military personnel; or
 - iii. destructive seizure or use for a military purpose.

Discharge of a nuclear weapon will be deemed a war-like act, even if accidental.

- k. arising directly or indirectly from an **occurrence** outside of the **territory**.

3. **Bodily injury or personal injury:**

- a. to an **insured**;
- b. arising out of the transmission of a communicable disease by an **insured**; or
- c. arising out of sexual molestation, corporal punishment or physical or mental abuse.

4. **Property damage** to property owned by, loaned to, rented to, or in the care, custody or in control of an **insured**.

Subject to this endorsement's **property damage** sublimit of liability, this exclusion 4. does not apply to the extent an **insured** assumed contractual obligation for **property damage** to an **event location**, or to any fixtures or contents rented, hired, loaned to, or within any **insured's** care, custody or control at the **event location**.

5. **Personal Injury**

- a. arising out of oral or written publication of material, if done by or at the direction of anyone seeking coverage with knowledge of its falsity;
- b. arising out of:

- i. advertising, broadcasting or telecasting activities by an **insured**, or
- ii. libel, slander, defamation or violation of privacy if:
 - (a) the same first injurious publication or utterance occurred prior to the **date of issue**, or
 - (b) the offense committed is about any organization or business, its products or services, made with knowledge of the falsity and by or at an **insured's** direction.

c. arising out of a breach of contract; or

d. arising out of the use of an electronic chatroom or bulletin board.

6. **Damages:**

- a. for which any person seeking coverage under this endorsement is obligated to pay by reason of assumption of liability in a contract or agreement or by bailment. However, this exclusion does not eliminate coverage for damages:
 - i. That any person seeking coverage under this endorsement would have in the absence of the contract, bailment or agreement, and provided they are otherwise covered under this endorsement; or
 - ii. Assumed by an **insured** in a contract or agreement that is an **insured contract**, provided the damages are otherwise not excluded by this policy.
- b. an **insured** or any company providing primary insurance may have to pay under any of the following laws:
 - i. workers' compensation law;
 - ii. unemployment compensation
 - iii. disability benefits; or
 - iv. any other similar law.
- c. which are designated as punitive, exemplary or statutory multiple damages.

7. Any loss, cost or expense arising out of any:

- a. request, demand or order issued or made pursuant to any environmental protection or environmental liability statutes or regulations that anyone tests for, monitor, clean up, remove, contain, treat, detoxify, or neutralize, or in any way respond to or assess the effects of any **pollutants**.
- b. claim or suit by or on behalf of a governmental testing authority for damages because of

testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralizing or in any way responding to or assessing the effects of any **pollutants**.

8. Any amounts assessed against an **insured** by a corporation or association of property owners.

DUTIES AFTER OCCURRENCE

In the event of an **occurrence** which may involve the coverage provided by this endorsement, **you** (or someone acting for **you**) must perform the following duties that apply. **You** must help **us** by seeing that these are performed:

1. Give written notice to **us** or **our** agent as soon as is reasonably practicable, which sets forth:
 - a. the identity of the policy and the **named insured**;
 - b. reasonably available information on the time, place and circumstances of the **occurrence**; and
 - c. name and addresses of any claimants and witnesses.
2. Promptly forward to **us** every notice, demand, summons or other process relating to the **occurrence**.

3. At our request, help **us**:
 - a. to make settlement;
 - b. to enforce any right of contribution or indemnity against any person or organization who may be liable to **you**;
 - c. with the conduct of suits and attend hearings and trials;
 - d. to secure and give evidence and obtain the attendance of witnesses;
 - e. Cooperate with and assist **us** in any manner concerning a claim or suit; and
 - f. Submit to examinations by **us**, under oath, as **we** may reasonably require.
4. **You** will not, except at **your** own cost, voluntarily make payment, assume obligation or incur expense.

OTHER INSURANCE

The insurance **we** provide in this endorsement is excess over any other valid and collectible insurance available to an **insured**.

All other provisions of this policy apply.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SPECIAL PROVISIONS – ARKANSAS

DEFINITIONS

Immediate family is deleted and replaced by the following:

Immediate family means the parents, children and grandparents of an **honoree**.

SECTION I – COVERAGES

Coverage A – Cancellation or Postponement of the Event

The first paragraph of this section is deleted and replaced with the following:

We will pay for all deposits forfeited and other amounts paid or contracted to be paid, by the **honorees** or **immediate family**, for the following items, services or locations to be rendered, delivered or used on the **event date**, due to the necessary and unavoidable cancellation or postponement of the event:

Exclusions – Coverage D

This section is deleted and replaced with the following:

We will not pay for any loss, including breakage or damage, resulting directly or indirectly from:

1. Damage arising from wear and tear, moth, vermin, deterioration, confiscation or detention; or
2. Damage arising from atmospheric or climactic conditions; or
3. Theft.

SECTION IV – CONDITIONS

The following **CONDITIONS** are deleted and replaced:

Subrogation. An **insured** may waive in writing before a loss all rights of recovery against any person. If not

waived, **we** may require an assignment of rights of recovery for a loss to the extent that payment is made by **us**. However, **we** will be entitled to a recovery only after an **insured** has been fully compensated for the loss sustained. If an assignment is sought, the **insured** shall sign and deliver related papers and cooperate with **us** in any reasonable manner.

Suit Against Us. No action shall be brought unless the **insured** has fully complied with all the terms of this policy and the action is started within five years after the date of the loss.

Appraisal. If **you** and **we** fail to agree on the amount of the loss, an appraisal of the loss may take place. However, an appraisal will take place only if both **you** and **we** agree, voluntarily, to have the loss appraised. If so agreed, each party will select a competent, independent appraiser and notify the other party of the appraiser's identity within twenty (20) days after both parties agree. The two appraisers will then select a competent, impartial umpire. If the two appraisers are unable to agree upon an umpire within fifteen (15) days, **you** or **we** can ask a judge of a court of record in the state of **your** residence to select an umpire. The appraiser will separately set the amount of the loss. If the appraisers submit a written report of an agreement to **us**, the amount agreed upon will be the amount of the loss. If the appraisers fail to agree within a reasonable time, they will submit their differences to the umpire. An appraisal decision will not be binding on either party. Written agreement signed by any two of these three will set the amount of the loss. The party selecting that appraiser will pay each appraiser. Other expenses and the compensation of the umpire will be paid equally by **you** and **us**. **Our** request for an appraisal or examination will not waive any of **our** rights.

All other provisions of the policy apply.

<i>SERFF Tracking Number:</i>	<i>TRVA-125390038</i>	<i>State:</i>	<i>Arkansas</i>
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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Review Status:	Approved	12/26/2007
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Comments:

Attachments:

~PC TD-1form.pdf
FFS-1.pdf

Satisfied -Name:	ExMemo	Review Status:	Approved	12/26/2007
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Comments:

Attachment:

AR Filing Package for Forms.pdf

Property & Casualty Transmittal Document

**1. Reserved for Insurance
Dept. Use Only****2. Insurance Department Use only**

a. Date the filing is received:

b. Analyst:

c. Disposition:

d. Date of disposition of the filing:

e. Effective date of filing:

New Business

Renewal Business

f. State Filing #:

g. SERFF Filing #:

h. Subject Codes

3. Group Name

Travelers

Group NAIC #

3548

4. Company Name(s)**Domicile****NAIC #****FEIN #****State #**

The Standard Fire Insurance Co.

CT

3548-19070

06-6033509

5. Company Tracking Number

2007-12-0045B

Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Ann Lavorgna One Tower Square Hartford, CT 06183	Regulatory Analyst	(860) 277-5466	(860) 277-5204	AJLAVORG@travelers.com
	One Tower Square Hartford, CT 06183		(860) 277-	(860) 277-	

7. Signature of authorized filer

Ann Lavorgna

8. Please print name of authorized filer

Ann Lavorgna

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	Inland Marine
10. Sub-Type of Insurance (Sub-TOI)	Personal Inland Marine
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	Wedding Protector Plan
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: February 14, 2008 Renewal:
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	
17. Reference Organization # & Title	
18. Company's Date of Filing	December 17, 2007
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	2007-12-0045B
21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]	

This filing introduces a new liability form SE-200L (02-08), which includes 'Liquor Liability' coverage up to the liability limit.

We are also broadening coverages, by extending the definition of 'Immediate Family' to include 'Grandparents' and removing the 'Mysterious Disappearance' exclusion for form SE-300 AR (02-08).

An Explanatory Memorandum is attached.

There is no renewal business for this program, so it will be available only to new customers.

The effective date is February 14, 2008.

22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
<div data-bbox="152 1396 277 1459"> <p>Check #:</p> <p>Amount:</p> </div> <div data-bbox="152 1713 1458 1776"> <p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p> </div>	

***Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)
 (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #		2007-12-0045B		
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)				
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement Or withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	New Business Declarations	PL-13105 (02-08)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02	Special Event Liability Endorsement Including Liquor Liability	SE-200L (02-08)	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03	Special Provisions - Arkansas	SE-300 AR (02-08)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

ARKANSAS WEDDING PROTECTOR PLAN
THE STANDARD FIRE INSURANCE COMPANY

EXPLANATORY MEMORANDUM

We are introducing a new liability Form SE 200L (02-08), which includes 'Liquor Liability' coverage up to the liability limit. Customers will now have the option to buy liability coverage with or without 'Liquor Liability'. Effective date for this will be 02/14/2008. There is no renewal business for this program and hence this will be available only to new customers.

We are also broadening coverages, by extending the definition of 'Immediate Family' to include 'Grandparents' and removing the 'Mysterious Disappearance' exclusion. Form SE-300 AR (02-08)

These changes will allow us to enhance the already existent 'Wedding Protector Plan'.